

POLICE DEPARTMENT, COUNTY OF NASSAU, NEW YORK
STANDARD DEPARTMENTAL RECOGNITION REQUEST

PDCN 234 - REV. 1/96

INSTRUCTIONS

This form shall be typed as an original and one copy and forward to member's Commanding Officer within ten (10) days of the occurrence.

DISTRIBUTION

ORIGINAL - AWARDS COMMITTEE (T.O.C.)
COPY - COMMAND

MERITORIOUS CASE NO.

JAN. 1 TO APR. 30 <input type="checkbox"/> SEPT. 1 TO DEC. 31		ACKNOWLEDGMENT SENT TO C.O.		ORIGINAL TO P.A.B.		VERIFICATION BY POLICE SURGEON	
MAY 1 TO AUG. 31		20					
TYPE OF AWARD		<input type="checkbox"/> COMMAND RECOGNITION <input type="checkbox"/> PURPLE HEART <input type="checkbox"/> LIFE SAVING		FOR		AGAINST	
<input type="checkbox"/> MERITORIOUS <input type="checkbox"/> COMMENDATION <input type="checkbox"/> DISTINGUISHED SERVICE <input type="checkbox"/> VALOR				AWARDS COMMITTEE VOTES		ABSTENTION	
RECEIVED BY		DATE		SIGNATURE OF CHAIRMAN		FOR	
AWARDS COMMITTEE						AGAINST	
						ABSTENTION	

DO NOT WRITE IN ABOVE AREA, FOR AWARDS COMMITTEE USE ONLY

RANK		LAST NAME		FIRST NAME		M.I.		SERIAL NO.		SHIELD NO.		COMMAND		PRECINCT OF OCCURRENCE	
P.O.		VARA		JAMES				8204		2526		003		03	
DATE AND TIME OF OCCURRENCE				PLACE OF OCCURRENCE: NO. STREET				APT. NO. VILLAGE							
10/09/2004 0430				JERICHO TPK								NEW HYDE PARK			
TYPE PREMISE				DUTY PERFORMED				<input checked="" type="checkbox"/> R.M.P. <input type="checkbox"/> FOOT POST <input type="checkbox"/> DET. INVESTIGATION							
STREET				<input type="checkbox"/> SPECIAL ASSIGNMENT <input type="checkbox"/> OFF DUTY <input type="checkbox"/> OTHER (Specify)											
CASE REPORT NO.				D.D. NO.				TYPE OF INCIDENT							
204CR0082564								<input checked="" type="checkbox"/> ARREST <input type="checkbox"/> RESCUE							
<input type="checkbox"/> INVESTIGATION <input type="checkbox"/> AIDED CASE <input type="checkbox"/> OTHER (Specify)															
ANY OTHER CASES CLOSED AS A RESULT OF THIS ARREST?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				TOTAL NO. CASES CLOSED?							
								OFFICER ASSAULTED OR ENDANGERED?							
								<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
OFFICER'S AIDED NO.				TYPE OF INJURY				<input type="checkbox"/> HOSPITALIZED (No. of days)							
								<input type="checkbox"/> REMAINED ON DUTY							
<input type="checkbox"/> TREATED AND RELEASED <input type="checkbox"/> REPORTED SICK (No. of days)															
ANY OTHER PERSON INJURED OR ENDANGERED?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				AIDED NO.							
								TYPE OF INJURY							
WEAPON INVOLVED?				TYPE OF WEAPON				WEAPON CALIBRE							
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				HIGH POINT HAND GUN				9MM							
WEAPON LOADED				AIMED AT OFFICER				FIRED AT OFFICER							
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
NARCOTICS SEIZED?				QUANTITY AND TYPE				PROPERTY SEIZED/RECOVERED?							
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO								<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
QUANTITY AND TYPE				1 HAND GUN											
ILLNESS/INJURY				HOW LONG WAS AIDED IN THIS STATE PRIOR TO ARRIVAL? (Minutes)				HOW LONG MOUTH TO MOUTH PERFORMED? (Minutes)							
								HOW LONG CPR PERFORMED? (Minutes)							
OTHER CARE RENDERED															

I certify that the information contained herein is a true statement of facts

RANK

SIGNATURE

SERIAL NO.

DATE

P.O.

J-V

8204

10/26/04

COMMAND MERITORIOUS NO.

NAME OF INVESTIGATING SUPERVISOR

SERIAL NO.

TOTAL NO. OF PDCN 234'S FORWARDED THIS CASE NO.?

BRIEF STATEMENT OF ACT (Short synopsis)

While on routine patrol at approximately 0430 hours on 10/09/04, I observed a black 1999 Mazda NY reg CRJ7395 w/b on Jericho Tpke in New Hyde Park, NY operating at a high rate of speed. (55mph in a 35mph zone) A car stop was conducted and the vehicle stopped on Jericho Tpke and Holland Ave in Floral Park. Upon approaching the vehicle I observed that subject Darryl T Coggins was in operation of the vehicle. Passenger [REDACTED] was in the front passenger seat and passenger [REDACTED] was in the rear of the vehicle seated directly behind the driver. I detected a strong odor of an alcoholic beverage on the operator's breath, impaired motor skills and glassy bloodshot eyes. Subject was then asked to exit the vehicle and a SFST and a PBT were conducted at scene. At this time the subject then began to get agitated and while attempting to place the subject into custody he fled on foot e/b on Jericho Tpke to Holland Ave. He then fled n/b on Holland Ave. While the subject was running he was holding his left hand to his left side as if he was

RANK		SIGNATURE		SERIAL NO.		<input type="checkbox"/> APPROVAL	
I,				NASSAU COUNTY		<input type="checkbox"/> DISAPPROVAL of Department	
<input type="checkbox"/> COMMAND RECOGNITION <input type="checkbox"/> PURPLE HEART <input type="checkbox"/> LIFE SAVING <input type="checkbox"/> MERITORIOUS		<input type="checkbox"/> COMMENDATION <input type="checkbox"/> DISTINGUISHED SERVICE <input type="checkbox"/> VALOR		<input type="checkbox"/> FILE (Specify reason in remarks)		DATE	
Recognition, grade							
RANK		SIGNATURE		SERIAL NO.		<input type="checkbox"/> APPROVAL	
I,				820385		<input type="checkbox"/> DISAPPROVAL of Department	
<input type="checkbox"/> COMMAND RECOGNITION <input type="checkbox"/> PURPLE HEART <input type="checkbox"/> LIFE SAVING <input type="checkbox"/> MERITORIOUS		<input type="checkbox"/> COMMENDATION <input type="checkbox"/> DISTINGUISHED SERVICE <input type="checkbox"/> VALOR		<input type="checkbox"/> FILE (Specify reason in remarks)		DATE	
Recognition, grade							
RANK		SIGNATURE		SERIAL NO.		<input type="checkbox"/> APPROVAL	
I,						<input type="checkbox"/> DISAPPROVAL of Department	
<input type="checkbox"/> COMMAND RECOGNITION <input type="checkbox"/> PURPLE HEART <input type="checkbox"/> LIFE SAVING <input type="checkbox"/> MERITORIOUS		<input type="checkbox"/> COMMENDATION <input type="checkbox"/> DISTINGUISHED SERVICE <input type="checkbox"/> VALOR		<input type="checkbox"/> FILE (Specify reason in remarks)		DATE	
Recognition, grade							

REMARKS BY ENDORSERS (If more room is required, use reverse side of this form.)

JETFORM

holding something. The subject then ran in the rear yard of 6 Holland Ave and jumped over a 4ft chain link fence. From the beginning of the foot pursuit up until this point I was no more than 3 or 4 feet from the subject. As the subject jumped over the fence I heard a noise similar to metal hitting the ground and took my eyes off of the subject to look down at the noise and observed a black object laying on the ground on the subject's side of the fence. This black object, was a loaded Hi-Point 9mm automatic handgun colored black. I safeguarded the weapon and broadcast a radio description for the defendant. This 9mm pistol was later observed to have its serial number obliterated rendering untraceable for ownership. The defendant fled through the rear yards on Holland Ave and I then lost sight of the subject. A search was conducted with negative results. Further investigation revealed a loaded magazine clip next to the front passenger door of the vehicle. A search of the building rooftop at 329 Jericho Tpke, a sewer drain and a mailbox were conducted in attempt to locate the handgun that this clip belonged to. I interviewed the remaining subject at the scene who gave proper identification and identified the defendant as the operator of the car at the time of the original stop. In addition, I had the photo driver's license of the defendant prior to his fleeing.

On Saturday 10-09-2004 the defendant surrendered to the Third Squad in the presence of his attorney.

NASSAU COUNTY

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